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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application of Doctor Mumber 5		
APPLICATION AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY		OR	OTHER SMALL	
FOR	NUMBER FILED	NUMBI	ER EXTRA		RATE (\$)	FEE (\$)		· RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))									
SEARCH FEE (37 CFR 1.16(k), (i), or (m))									
(37 CFR 1.16(0), (p), or (q))							·		
TOTAL CLAIMS (37 CFR 1.16(i))	. minus 20	,			x =		OR	x =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3				х =			X =	
APPLICATION SIZE FEE (37 CFR 1.16(s)) If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						****** . *		néříšed: C	grander program
MULTIPLE DEPENDENT	CLAIM PRESENT (37 C	FR 1.16(j))							
* If the difference in column	ın 1 is less than zero, enf	ter "0" in column :	2. .		TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)					SMALL E	ENTITY	OR .	OTHER SMALL I	
∢ RE	CLAIMS EMAINING AFTER MENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
Total Total (17 CFR 1.16(h)) Application Size Fee	45 Minus	"45	-		x =		OR	х =	
Independent (37 CFR 1,16(h))	3 Minus	3	-/		х =	-/	OR	х =	
Application Size Fee	(37 CFR 1.16(s))								
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))							· OR		
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	Column 1)	(Column 2)	(Calumn 3)				- ,		-
m 7-11-01 RE	CLAIMS EMAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	6 Minus	-45	* Ø		х =		OR	x =	
Independent (37 CFR 1.15(h))	3 Minus	<u> </u>	= 10		х =		OR	x =	
Application Size Fee (37 CFR 1.16(s))									
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18())							OR		
	. •		•		TOTAL ADD'L FEE		OR	TOTAL - ADD'L FEE	
	n 1 is less than the entry i				er *20*		i	•	·

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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